| | | | | | | | | Application or Docket Number | | | | | |
|--|---|---|----------------|-------------------------------|---------------------|------------------|--------|------------------------------|--|----------|------------|------------------------|--|
| Effective October 1, 2000 0989957 | | | | | | | | | | | | 7 | |
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | MALL E | NTITY | OR | | R THAN ENTITY | |
| T | OTAL CLAIMS | | 24 | f | | | | RATE | FEE | 7 | RATE | FEE | |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | | BASIC FEI | 355.00 | OR | BASIC FEE | 710.00 | |
| π | OTAL CHARGE | ABLE CLAIMS | 24 min | nus 20= | . 4 | | | X\$ 9= | | OR | X\$18= | 77- | |
| INI | DEPENDENT C | LAIMS | 4 m | inus 3 = | . / | | | X40= | | OR | X80= | 86 | |
| MI | JLTIPLE DEPEN | IDENT CLAIM P | RESENT | | | | ŀ | +135= | | 1 | +270= | 0 | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | TOTAL | | OR | TOTAL | 862 | |
| CLAIMS AS AMENDED - PART II | | | | | | | | TOTAL | | Jon | OTHER | | |
| (Column 1) 5-/3-05 (Column 2) | | | | | | (Column 3) | | SMALL | ENTITY | OR | SMALL | | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENOMENT | | HIGH NUM PREVIO PAID | BER OUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | . 30 | Minus | . 8 | 4 | -6 | | X\$ 9= | | OR | X\$18= | 300,00 | |
| | Independent | • 4 | Minus | 4 | <u> </u> | = ` | | X40= | | OR | X80= | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | +135= | | | +270= | | |
| | | | | | | | | TOTAL | | OR | TOTAL | | |
| | 11/16/0 | ۲ | | | | | Al | DOIT. FEE | | OR | ADDIT. FEE | <u> </u> | |
| | maring in which | (Column 1) CLAIMS | iona de de | (Colur High | | (Column 3) | _ | | 4001 | | | 1001 | |
| AMENDMENT B | | REMAINING AFTER AMENDMENT | | NUMI PREVIO PAID | DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | .30 | Minus | 3 | 0 | - /. | | X\$ 9= | | OR | X\$18= | | |
| | Independent | . 4 | Minus | 4 | / | - / | ı | X40= | | OR | X80= | | |
| - | FIRST PRESE | NTATION OF MU | ILTIPLE DEF | ENDENT | CLAIM | | | +135=/ | | OR | +270= | | |
| | | | | | | | | TOTAL DOIT, FEE | | | TOTAL | | |
| | (Column 1) (Column 2) (Column 3) | | | | | | | | · | , | ADDIT. FEE | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENOMENT | | HIGH NUM PREVIO PAID | EST BER SUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | • | Minus | •• | | 8 | | X\$ 9≂ | | OB | X\$18= | | |
| | Independent | • | Minus | ••• | | 2 | - | X40= | | | X80= | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | - | .,,,, | | OR | | | |
| +135= | | | | | | | | | | | +270= | | |
| •• | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." | | | | | | | | | | | | |
| | The "Highest Num | nber Previously Pai | d For (Total o | rindepend | ent) is the | highest numbe | r foun | d in the ap | propriate box | t in col | umn 1. | | |